OIPE ENGRAPE

PATENTS
Serial No. 09/917,294
Confirmation No. 8101
Attorney Docket No. CKB-075.01
((Formerly Attorney Docket No. C1104-7075)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:
Dowling et al.

Art Unit: 2655

Application No: 09/917,294

Filed: July 26, 2001

For: LIGHTING CONTROL USING SPEECH RECOGNITION

Confirmation No.: 8108

Examiner: Vo, Huyen X.

## **CERTIFICATE OF MAILING**

I hereby certify that the following paper is being deposited with the United States Postal Service as first-class mail in an envelope addressed to Mail Stop: Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on June 10, 2005.

John Barretto

01 FC:1202

400Alexandria, VA 22313-1450

Sir:

## **PETITION FOR EXTENSION OF TIME**

In accordance with 37 C.F.R. § 1.136(a), please grant a two-month extension of time for filing a response to the above-identified application's outstanding Office action.

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BEST AVAILABLE COPY Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 **CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY** SMALL ENTITY TYPE [ OR (Column 2) (Column 1) TOTAL CLAIMS RATE FEE FEE RATE BASIC FEE 710.00 BASIC FEE 355.00 NUMBER EXTRA OR FOR NUMBER FILED X\$18= TOTAL CHARGEABLE CLAIMS X\$ 9= minus 20= OR XBO= INDEPENDENT CLAIMS minus 3 = X40= OR MULTIPLE DEPENDENT CLAIM PRESENT +135= +270= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 **TOTAL** 71000 TOTAL OR OTHER THAN **CLAIMS AS AMENDED - PART II** SMALL ENTITY SMALL ENTITY OR (Column 1) (Column 3) (Column 2) ADDI-HIGHEST CLAIMS ADDI-NUMBER PRESENT REMAINING RATE TIONAL RATE TIONAL PREVIOUSLY AFTER **EXTRA** FEE FEE PAID FOR MENDMEN X\$18= Minus X\$ 9= OR Total Independent Minus X80= X40= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) HIGHEST CI AIMS ADDI-ADDI-NUMBER PRESENT 8 REMAINING TIONAL RATE TIONAL RATE PREVIOUSLY AFTER **EXTRA** FEE FEE PAID FOR MENDMENT X\$18= Minus  $\mathcal{O}$ X\$ 9= OR Total Independent Minus X80= X40= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR TOTAL OR ADDIT, FEE ADDIT, FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHES ADDI-ADDI-NUMBER PRESENT REMAINING TIONAL RATE TIONAL RATE AFTER **PREVIOUSLY EXTRA** FEE AMENDMENT PAID FOR FEE 20 100 Minus X\$18= Total X\$ 9= OR Independent Minus ... X80= X40= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL  $\varphi$  & $\mathsf{V}$ OR "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE ADDIT, FEE "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.